24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	
	C C00448696
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	M M / D D / Y Y Y Y
Mailing Address PO Box 388	03 15 2014 Amount
City State Zip Code	547.90
Alexandria VA 22313-0388	Transaction ID: E07FA505CBF8C459B8F3 Date of Disbursement or Obligation
Purpose of Expenditure IE-Sasse-Online Processing Category/ Type	03 / 15 / Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Benjamin E Sasse Oppose	President X Senate State: NE
Calendar Year-To-Date Per Election for Office Sought B4387.83 Disbut	ursement For: Primary General
	Other (specify)
Full Name of Payee Envision Printers/Marketing	Date of Public Distribution/Dissemination 03 19 2014
Mailing Address 2 Riverbend Pkwy	00 10 2014
	Amount
City State Zip Code	10873.64
Leesburg VA 20176-0000	Transaction ID: E76FE9A3EAD53437AB5A Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
IE-Sasse-Direct Mail Production Type	03 19 2014
Name of Federal Candidate Support Office	e Sought: House District:
Benjamin E Sasse Oppose	President X Senate State: NE
Calendar Year-To-Date Disbu	ursement For: X Primary General
Per Election for Office Sought 95261.47 2014	
(a) SUBTOTAL of Itemized Independent Expenditures	11421.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	11421.54
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Paul Kilgore	M / D D / Y T Y T Y
[Electronically Filed] Date 0	3 19 2014
Signature	